

Where women live influences decisions about breast cancer treatment

January 21 2016, by Rose Trapnell



QUT research has found a woman's intention to use adjuvant therapy before or after breast cancer surgery varied significantly depending on where she lives in Queensland.

New joint research has found that the distance to cancer services may be influencing the treatment intentions of regional Queensland women diagnosed with breast cancer.

Specifically, a study by QUT, Cancer Council and BreastScreen Queensland found that where a woman lives impacts on the intention to use additional radiotherapy, chemotherapy and hormonal [therapy](#) as part of their [breast cancer treatment](#).

The research examined the data of 6357 [women](#) diagnosed with screen-

detected invasive breast cancers in Queensland between 1997 and 2008.

QUT PhD researcher Jeff Ching-Fu Hsieh said the research found women living closer to a radiation treatment facility were more likely to agree to be scheduled to use adjuvant therapy to treat breast cancer.

Adjuvant therapy is additional treatment commonly given before or after [breast cancer surgery](#), to improve disease-specific symptoms and overall survival.

Mr Hsieh said the study was the first of its kind, examining how geography impacted the intention to use adjuvant therapy after a diagnosis of breast cancer and illustrated the important role spatial mathematics can have in the health and other sectors.

Cancer Council Queensland spokesperson Katie Clift said the research found the intention to use adjuvant therapy varied significantly depending on where a woman lived in Queensland.

"The study found women living more than four hours from a radiation facility were over two times less likely to be scheduled for adjuvant radiotherapy than those living within one hour of the closest facility," Ms Clift said.

"Our findings suggest women and/or their treating clinicians may be making decisions regarding the treatment strategy based on perceived barriers to treatment, not simply an inability of women to take up their intended option.

"More research is needed to understand whether this reflects the decision making of the women themselves, or the recommendations made by their referring doctor.

"The research also suggests there are other unmeasured geographical barriers influencing treatment choices for women diagnosed with breast cancer.

"There is a great need to identify these additional barriers, and how they are impacting on Queensland women and the treatment intentions.

"Long-term investigations into geographic differentials are vitally important to cancer control in Queensland, helping us to identify inequalities and develop services and programs to ensure survival outcomes are improved."

Cancer Council recommends women affected by breast cancer discuss their [treatment](#) options with their GP and treating oncologist.

Around 3100 Queensland women are diagnosed with [breast cancer](#) each year, and about 500 women die from the disease.

More information: Jeff Ching-Fu Hsieh et al. Geographic variation in the intended choice of adjuvant treatments for women diagnosed with screen-detected breast cancer in Queensland, *BMC Public Health* (2015). [DOI: 10.1186/s12889-015-2527-2](https://doi.org/10.1186/s12889-015-2527-2)

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